

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) According to the Health Information of India 2005, the total number of Government doctors were 76, 925 as against 45, 199 in 2001.

(b) and (c) Funding under Central Schemes is basically towards Central Government hospitals and dispensaries based on their assessed requirement and resource availability. No specific study has been undertaken for assessing the satisfaction level of patients in response to quality of services. However, the fact remains that all Central Government hospitals and dispensaries have very high turnover both in respect of extending inpatient and outpatient services.

### **Ban on advertisement of colas**

†511. SHRI AJAY MAROO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to ban advertisements of soft drinks on the lines of ban on advertisements of wine and cigarettes;

(b) if so, the final conclusion of Government regarding effect of such soft drinks on health due to their consumption; and

(c) whether foreign soft drinks manufacturing companies have submitted any facts before Government thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) There is no such proposal under consideration under PFA Rules, 1955.

(b) and (c) the soft drinks conforming to the standards of carbonated water as laid down under PFA Rules, 1995 are safe for human consumption.

### **WHO programme on spurious drugs**

512. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether in an attempt to tackle the menace of fake life saving

† Original notice of the question was received in Hindi.

medicines, the WHO with their partners have reportedly launched a massive campaign to combat the lethal counterfeit drugs industry;

(b) if so, the details thereof;

(c) whether the sale of counterfeit medicines on the internet is growing in Asia and India is also a victim; and

(d) if so, the details of further action Government propose to take on the menace of fake medicines?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Recognizing the need for greater international cooperation in combating counterfeit medical products, the World Health Organization (WHO) has initiated the process leading to the establishment of an organization called IMPACT (International Medical Products Anti-Counterfeiting Taskforce) for combating the spread of counterfeits.

The establishment of the Taskforce (IMPACT) was proposed by WHO and endorsed by 160 participants at an international conference in Rome in February, 2006, representing 57 national drug regulatory authorities, 7 national organizations, 12 international associations of patients, health professional, pharmaceutical manufacturers and wholesalers. The Rome conference issued a set of principles and recommendations, enshrined in the 'Declaration of Rome'.

IMPACT aims at sharing expertise, identifying problems, seeking solutions, coordinating activities and working towards the common goal of fighting counterfeit medical products. The first General Meeting of IMPACT was held at Bonn, Germany, during 15th and 16th November, 2006.

In India, sale of medicine through Internet is not permitted.

The Government of India and WHO are resolved to work jointly to combat the menace of counterfeit drugs. India has been associated with the IMPACT initiative from its inception. The Convener of IMPACT has recently held discussions with the Drugs Controller (India). The discussions were focused on developing a scheme for improving cooperation between importing and exporting countries to combat counterfeit drugs.

(d) This Ministry has already initiated the process of amending the Drugs and Cosmetics Act, 1940, to provide for strict penalties, in

pursuance of the recommendations of the Mashelkar Committee, which was set up of comprehensive review of the regulatory system in the country including the extent of problem of spurious drugs and remedial measures to deal with this problem effectively. The major amendments proposed relate to enhancement of penalties prescribed under the Drugs and Cosmetics Act, provision of special courts for drug related offences, compounding of offences, authorizing the police also to file prosecution for drug related offences and making all drug related offences cognizable and non-bailable. All this is expected to act as a strong deterrent for manufacturers of counterfeit drugs. Government of India has also launched a 5-year World Bank aided Capacity Building Project for Food Safety and Quality Control of Drugs with a total project cost of Rs. 354.25 crores. Extensive assistance is being provided to State Governments to augment their drug testing facility by way of equipments, manpower, training and civil works under the Project.

### **Programmes to control population growth**

513. SHRI SANJAY RAUT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any specific time-bound programmes have been identified by Government recently with the help of experts to deal with the population growth in our country;

(b) if so, the details thereof;

(c) whether Government have given any response recently towards notice issued by the Hon'ble High Court/Supreme Court regarding implementation of two child norm for containing population growth in the country; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) The Government has launched the National Rural Health Mission (NRHM) on 12th April, 2005 throughout the country with special emphasis on 18 States with weak demographic and health indications. More attention is being paid to these States to provide accessible, affordable, accountable, effective, reliable, and quality primary health care, through creation of a cadre of Accredited Social Health